Company Tracking Number: AR-06-2010

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: 2010 Individual Medicare Supplement Plans

Project Name/Number: 2010 Lead Gen/AR-06-2010

Filing at a Glance

Company: Humana Insurance Company

Product Name: 2010 Individual Medicare SERFF Tr Num: HUMA-126588326 State: Arkansas

Supplement Plans

TOI: MS08I Individual Medicare Supplement - SERFF Status: Closed-Filed State Tr Num: 45450

Standard Plans 2010

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: AR-06-2010 State Status: Filed-Closed

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Authors: Michele Zabel, Dennis Disposition Date: 04/21/2010

Cowart, Paula Williamson, Adrianna

Maki, Mary Walker

Date Submitted: 04/16/2010 Disposition Status: Filed

Implementation Date:

Implementation Date Requested: On Approval

State Filing Description:

General Information

Project Name: 2010 Lead Gen

Project Number: AR-06-2010

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Overall Rate Impact:

Filing Status Changed: 04/21/2010 Explanation for Other Group Market Type:

State Status Changed: 04/21/2010

Group Market Type:

Created By: Adrianna Maki

Submitted By: Adrianna Maki

Corresponding Filing Tracking Number: AR-06-

2010

Filing Description:

Deemer Date:

Humana Insurance Company

NAIC: 119,73288 FEIN: 39-1263473

Humana Insurance Company is submitting the attached Lead Gen scripts for your review and approval. The scripts will

Company Tracking Number: AR-06-2010

TOI: MS081 Individual Medicare Supplement - Sub-TOI: MS081.001 Plan A 2010

Standard Plans 2010

Product Name: 2010 Individual Medicare Supplement Plans

Project Name/Number: 2010 Lead Gen/AR-06-2010

be used by our licensed agents in the solicitation of Humana's Medicare Supplement plans.

Forms:

GHA082JHH (OB Lead Gen Script) –Outbound calls GHA082KHH (IB Lead Gen Script) –Inbound calls

Policy forms ARMESM10A, ARMESM10B, ARMESM10C, ARMESM10F, ARMESM10F(HD), ARMESM10K, ARMESM10L

Please contact Anna Maki via SERFF, at amaki@humana.com, or at (502)476-1262 if you have any questions or require further information regarding this filing.

Company and Contact

Filing Contact Information

Adrianna Maki, Compliance Analyst amaki@humana.com 500 West Main Street 502-476-1262 [Phone]

Louisville, KY 40202

Filing Company Information

Humana Insurance Company CoCode: 73288 State of Domicile: Wisconsin 1100 Employers Boulevard Group Code: 119 Company Type: Life & Health

Green Bay, WI 54344 Group Name: State ID Number:

(800) 558-4444 ext. [Phone] FEIN Number: 39-1263473

Filing Fees

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No

Fee Explanation: \$50.00 per form x 2

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Humana Insurance Company \$100.00 04/16/2010 35727478

Company Tracking Number: AR-06-2010

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: 2010 Individual Medicare Supplement Plans

Project Name/Number: 2010 Lead Gen/AR-06-2010

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Stephanie Fowler	04/21/2010	04/21/2010

Company Tracking Number: AR-06-2010

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: 2010 Individual Medicare Supplement Plans

Project Name/Number: 2010 Lead Gen/AR-06-2010

Disposition

Disposition Date: 04/21/2010

Implementation Date:

Status: Filed Comment:

Rate data does NOT apply to filing.

Company Tracking Number: AR-06-2010

TOI: MS081 Individual Medicare Supplement - Sub-TOI: MS081.001 Plan A 2010

Standard Plans 2010

Product Name: 2010 Individual Medicare Supplement Plans

Project Name/Number: 2010 Lead Gen/AR-06-2010

Schedule Item Schedule Item Status Public Access

FormOB Lead Gen ScriptFiledYesFormIB Lead Gen ScriptFiledYes

Company Tracking Number: AR-06-2010

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: 2010 Individual Medicare Supplement Plans

Project Name/Number: 2010 Lead Gen/AR-06-2010

Form Schedule

Lead Form Number:

Schedule	Form	Form Type	e Form Name	Action	Action Specific	Readability	Attachment
Item	Number				Data		
Status							
Filed	GHA082JH	Other	OB Lead Gen Script	Initial		0.000	GHA082JHH
04/21/2010	Н						(OB Lead
							Gen
							Script).pdf
Filed	GHA082KH	Other	IB Lead Gen Script	Initial		0.000	GHA082KHH
04/21/2010	Н						(IB Lead Gen
							Script).pdf

OPENING

Use Required Opening:

"Good <morning, afternoon or evening>! My name is <First and Last> and I am calling from <Humana Insurance Company or Humana Insurance Company of Kentucky or Humana Health Benefit Plan of Louisiana, Inc. (Agent Note: replace with the Humana legal entity appropriate for the state of the caller use the legal entity grid to make this determination)>."

- O I'm contacting <Medicare beneficiaries or individuals who will soon be on Medicare> <to let you know about or to follow up on the information we recently mailed to you about or who recently responded to information they received on> the exciting Humana Medicare Supplement plans available in your area which may be able to help protect you against the out of pocket costs associated with original Medicare and/or which may be able to help you save money and/or provide you with improved benefits.
- State the Humana DMS telephone number "I'm calling from <1-866-205-0000>, Humana DMS TTY/TDD number <711> (Note: required in all states).
- State that this call may be recorded for quality and training purposes.
- When calling [KY, SD or WY] state the address of the call.
- When calling [IL, KY, or SD] state:
 - Do you have a few minutes to discuss this plan which may be able to provide you with benefits you're not receiving currently?
 - If no, thank them for their time and end the call.
 - If yes, continue.
- When calling [AR, ID, MS, PA, or SD]:
 - If the prospect states they are not interested, you may not attempt to continue the call by using a rebuttal.

Optional Statement: Humana offers Medicare Supplement plans at a very competitive price to give you an excellent combination of comprehensive benefits and low cost. Our plans can help you with expenses that Medicare may not cover, like deductibles, coinsurance, and even preventative services."

QUALIFICATION

Preliminary Qualification of the Prospect:

Thank the prospect for their patience, express gratitude, inform the prospect of the plan eligibility requirements and qualify as follows:

- Is prospect currently age 65 or older (under 65 and qualifies for Medicare due to disability) or will they be turning 65 within the next three months? Note: availability to those under age 65 is dependent upon state of residence.
- Prospect has both Medicare Part A and Part B (or will within the next three months)?

- Confirm that the prospect resides in the state/rating area for the plan that is being quoted.
- Confirm that the prospect does not have Medicaid. If the caller has Medicaid, they
 are only eligible if they can answer yes to one of the following questions:
 - Will Medicaid pay your Medicare Supplement policy premium?
 - Is the only benefit that you receive from Medicaid the premium payment for Part B of Medicare?
- If the caller has a Medicare Advantage plan, another Medicare Supplement or Group coverage, they are only eligible to enroll if they can answer yes to the following question:
 - Will the Humana Medicare Supplement policy replace their current coverage? Note if they are on a Medicare Advantage plan they may only be eligible to disenroll if they have a valid election period available to use at the time (such as SEP, OEP, AEP, etc.).

Required statement

"Humana Medicare Supplement applicants are subject to underwriting and may be declined coverage based on previous and/or current health conditions, unless one qualifies for guaranteed acceptance. After we discuss your needs and Humana Medicare Supplement plans available in your area, if one of the plans seems suitable we can discuss how underwriting and guaranteed acceptance works."

SELLING PROCESS

NEADS Analysis:

(Note: The purpose of the NEADS analysis is to determine plan suitability, and help the prospect in selecting the best plan for their particular needs.)

NEADS Based Selling; guide to probing for health care needs.

- (N) What kind of coverage does the prospect have now? What type of health coverage do they have (Medicare only, Medicare and PDP only, Medicaid, Group, MAPD, Medicare Supplement, etc.)? How much do they pay in premium for their current coverage?
- (E) Which benefits do they enjoy most? Which benefits are most important with their current coverage? Does Humana offer comparable benefits?
- (A) What would they change about their current health coverage?

 Does Humana meet their needs in these areas better than their current carrier?
- (D) Is there anyone that assists them in making their healthcare decisions? If yes, do they have POA or just assist in making their decisions?

(S) Summarize what the prospect has told you and offer them a solution to their concerns as appropriate.

Is a Humana Medicare Supplement plan suitable for their needs? If so, which Humana Medicare Supplement plan is most suitable? Confirm with the prospect that they agree with the plan you have recommended.

Plan Features:

 Present plan benefits and rates in detail utilizing the tools and resources which have been provided ('Med Supp' option on EDGE, Humana.com or Outline of Coverage).
 These policies contain exclusions and limitations. Benefits vary by plan and the premium will vary with the amount of benefits selected.

Convert Features to Benefits:

- Demonstrate the advantages of the plan features as they relate to the prospect's healthcare needs.
- Discuss how the advantages will benefit the prospect. EX: Additional coverage for hospitalization may mean less out of pocket expenses for you should you have to enter the hospital.
- Trial close. *EX: Does this Humana Medicare Supplement plan sound like a plan you could benefit from?*

Inform the caller that Humana is not connected with nor endorsed by the U.S. Government or the Federal Medicare Program.

Guaranteed Acceptance:

Determine if the caller is eligible for guaranteed acceptance. If they answer yes to either of the following questions, they are guaranteed acceptance into a Medicare Supplement plan at this time and no questions concerning underwriting can be asked:

- Are you applying for coverage during your Medicare Supplement open enrollment period?
- ➤ Have you lost, or are you losing or replacing, other health coverage which would qualify you for guaranteed acceptance?

Below are examples of guaranteed acceptance qualifications:

Are you applying for coverage during your Medicare Supplement open enrollment period (6 month period beginning on the first day of the month when the prospect is 65 years old or older AND enrolls in Medicare Part B)? If under the age of 65, open enrollment begins on the first day of the month when your Medicare Part B is effective. (Agent note: Applicable ONLY if plans are available to those under the age of 65 in the prospect's state of residence.)

- You are in a Medicare Advantage Plan and the plan is leaving Medicare or stops giving care in your area, or you move out of the plan's services area.
- o You have employer group health coverage or union coverage that is ending.
- You have Original Medicare and a Medicare SELECT policy and you move out of the Medicare SELECT policy's service area.
- You joined a Medicare Advantage plan or PACE when you were first eligible for Medicare at age 65 and within the first year of joining, you decide you want to switch to Original Medicare.
- You dropped a Medicare Supplement policy to join a Medicare Advantage Plan (or to switch to a Medicare SELECT policy) for the first time; you have been in the plan for less than a year, and you want to switch back.
- Your Medicare Supplement insurance company goes bankrupt and you lose your coverage, or your Medicare Supplement policy coverage otherwise ends through no fault of your own.
- You leave a Medicare Advantage plan, or drop a Medicare Supplement policy, because the company hasn't followed the rules or it misled you.

<u>Underwriting Review (omit if they qualify for quaranteed acceptance):</u>

Let the caller know that their eligibility for a Humana Medicare Supplement plan is dependant upon them meeting Humana underwriting requirements.

CLOSING

Close (Appointment/Seminar):

- Offer appointment/seminar: For example, what I'd like to do for you at this time is schedule one of our licensed <company name> agents to come to your home to show you the plan in black and white and provide answers to all of your questions so that you can make an informed decision. Most people find this to be very helpful. I'm sure you'll agree.
- (If Yes) If appointment/seminar is accepted continue:
 - I have openings on <<u>date></u> at <<u>time></u> or <<u>date></u> at <<u>time</u>>. Which is more convenient for you? (To schedule a seminar you will review the upcoming seminars in their area until they select the one they wish to attend. Then give them the date, time, location and address of the seminar.)
 - Verify first and last name.
 - Determine if anyone else in the home is on Medicare or will be in the next 3 months and will also attend the appointment/seminar.
 - Verify street address, city, county, state, zip and apartment number, if applicable.
 - Verify date and time of appointment/seminar (verify location of the seminar).
 - If the caller is not eligible for guaranteed acceptance inform them that their eligibility for a Humana Medicare supplement plan is dependant upon them meeting Humana's underwriting requirements.

- If the caller is not eligible for guaranteed acceptance ask them if they would like to discuss any of the underwriting questions over the phone to determine if they would meet our underwriting requirements or if they would prefer to discuss that with the agent who will visit them. (If they wish to discuss this over the phone see your training material on Humana's Medicare Supplement underwriting guidelines.)
 - If they do not meet the underwriting requirements state, "Based on what you've shared with me, I'm sorry to say that you do not meet the medical underwriting requirements for a Humana Medicare Supplement plan. I want to thank you though, for your time and your interest in Humana's Medicare Supplement plans. Humana offers many different types of coverage. I would be happy to go over all of the products we offer in your area."
 - If they meet underwriting <u>or</u> don't wish to discuss any of the underwriting questions over the phone continue through the script.
- Prepare the prospect for the appointment.
- State the importance of being present for appointment.
- Advise Humana agent will visit prospect's house at (date and time).
- Advise Humana agent will explain the plan(s) in detail and answer any question prospect may have.
- Ask the prospect to post date and time some where so they will remember it.
- During the <appointment or seminar> you will receive full information on the available Humana Medicare Supplement plan benefits.
- Perfect Telesales Experience (PTE) Question: On a scale of 1 to 5, with 5 being perfect, how well did I meet your needs and expectations during the call?
- Inform the prospect that Humana offers a wide variety of products in most areas of the country. Offer to discuss other products which may be of interest to them. (If yes, refer to the script for those products)
- Give prospect Humana DMS telephone number <1-866-205-0000>, Humana DMS TTY/TDD number <711> and hours of operation <State the current hours> prior to end of every call.
- Express gratitude.
- Ask for Referral.
- End call.
- (If no) If appointment/seminar is not accepted:
 - Ask the prospect if they have any questions you can answer that would help them make their decision.
 - Answer questions, refer back to the NEADS analysis conducted earlier in the call, discuss points of interest, determine if they have any objections and if so address the objections.

- Offer the appointment/seminar again: For example, what I'd like to do for you at
 this time is schedule one of our licensed agents to come to your home to discuss
 with you the plan, provide answers to all of your questions so that you can make an
 informed decision. Most people find this to be very helpful. I'm sure you'll agree.
- o (If Yes) Go to the second bullet under the Closing section and continue.
- o (If no) If appointment/seminar is not accepted:
 - Offer to mail them some information.
 - Perfect Telesales Experience (PTE) Question: On a scale of 1 to 5, with 5 being perfect, how well did I meet your needs and expectations during the call?
 - Thank the caller for considering Humana's Medicare Supplement product. Inform the caller that Humana offers a wide variety of products in most areas of the country. Offer to discuss other products available in their area which may be of more interest to them. (If yes, refer to the script for those products.)
 - Give prospect Humana DMS telephone number <1-866-205-0000>, Humana DMS TTY/TDD number <711> and hours of operation <state current hours> prior to end of every call.
 - Express gratitude.
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 - End call.

NOTE:

As a general rule, the call should flow according to this outline: Open-Qualify-Sell-Close. As the prospect asks questions which force the flow to change address the diversion to the call flow appropriately and go back to where you initially left the conversation (point of diversion).

Unlicensed Agents – Engaging in discussing plan rates & benefits is a violation of DOI regulations.

Demonstrate Operational and Service excellence at all times by being courteous and professional. Provide Healthcare guidance aiding the caller to make an informed decision. As part of consultative selling, make it your priority to guide the prospect toward the plan that best meets their healthcare needs.

If the caller insists that they do not wish to discuss benefits or go through the entire presentation and state they would like to have an appointment or seminar or have additional information mailed to them, we must honor their request.

<u>OPENING</u>

Use Required Opening:

"Thank you for calling <Humana Insurance Company or Humana Insurance Company of Kentucky or Humana Health Benefit Plan of Louisiana, Inc. (Agent Note: To find the Humana legal entity appropriate for the state of the caller, use the legal entity grid)>. My name is <First and Last> How may I help you?"

- Inquire as to the specific nature of the call
 - o Requesting information about available Medicare Supplement plans?
 - If sales call, reconfirm the request for Plan information and collect demographic information:
 - Prospect telephone number with area code
 - Prospect last and first name
 - Prospect's full address, zip code and state, search for record/create record, as applicable
 - o Calling for Customer Assistance?
 - If non-sales call, reconfirm the request for Customer Service and route call to Customer Service or other departments, as appropriate.

QUALIFICATION

Preliminary Qualification of the Prospect:

Thank the prospect for their patience, express gratitude, inform the prospect of the eligibility requirements and qualify as follows:

- Is prospect currently age 65 or older (under 65 and qualifies for Medicare due to disability) or will they be turning 65 within the next three months? Note: availability to those under age 65 is dependent upon state of residence.
- Prospect has both Medicare Part A and Part B (or will within the next three months)?
- o Confirm that the prospect resides in the state/rating area for the plan that is being quoted.
- o Confirm that the prospect does not have Medicaid. If the caller has Medicaid, they are only eligible if they can answer yes to one of the following questions:
 - Will Medicaid pay your Medicare Supplement policy premium?
 - Is the only benefit that you receive from Medicaid the premium payment for Part B of Medicare?
- If the caller has a Medicare Advantage plan, another Medicare supplement policy or Group coverage, they are only eligible to enroll if they can answer yes to the following question:
 - Will the Humana Medicare Supplement policy replace their current coverage? Note if they are on a Medicare Advantage plan they may only be eligible to disenroll if they have a valid election period available to use at the time (such as SEP, OEP, AEP, etc.).

Required statement

"Humana Medicare Supplement applicants are subject to underwriting and may be declined coverage based on previous and/or current health conditions, unless one qualifies for guaranteed acceptance. After we discuss your needs and Humana Medicare Supplement plans available in your area, if one of the plans seems suitable, we can discuss how underwriting and guaranteed acceptance work."

SELLING PROCESS

NEADS Analysis:

(Note: The purpose of the NEADS analysis is to determine plan suitability, and help the prospect in selecting the best plan for their particular needs.)

NEADS Based Selling; guide to probing for health care needs.

- (N) What kind of coverage does the prospect have now? What type of health coverage do they have (Medicare only, Medicare and PDP only, Medicaid, Group, MAPD, Medicare Supplement, etc.)? How much do they pay in premium for their current coverage?
- (E) Which benefits do they enjoy most? Which benefits are most important with their current coverage? Does Humana offer comparable benefits?
- (A) What would they change about their current health coverage?

 Does Humana meet their needs in these areas better than their current carrier?
- (D) Is there anyone that assists them in making their healthcare decisions? If yes, do they have POA or just assist in making their decisions?
- (S) Summarize what the prospect has told you and offer them a solution to their concerns as appropriate.

Is a Humana Medicare Supplement plan suitable for their needs? If so, which Humana Medicare Supplement plan is most suitable? Confirm with the prospect that they agree with the plan you have recommended.

Plan Features:

 Present plan benefits and rates in detail utilizing the tools and resources which have been provided ('Med Supp' option on EDGE, Humana.com or Outline of Coverage).
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Convert Features to Benefits:

- Demonstrate the advantages of the plan features as they relate to the prospect's healthcare needs.
- o Discuss how the advantages will benefit the prospect. EX: Additional coverage for hospitalization may mean less out of pocket expenses for you should you have to enter the hospital.
- o Trial close. EX: Does this Humana Medicare Supplement plan sound like a plan you could benefit from?

Inform the caller that Humana is not connected with nor endorsed by the U.S. Government or the Federal Medicare Program.

Guaranteed Acceptance:

Determine if the caller is eligible for guaranteed acceptance. If they answer yes to either of the following questions, they are guaranteed acceptance into a Medicare Supplement plan at this time and no questions concerning underwriting can be asked:

- Are you applying for coverage during your Medicare Supplement open enrollment period?
- ➤ Have you lost, or are you losing or replacing, other health coverage which would qualify you for guaranteed acceptance?

Below are examples of guaranteed acceptance qualifications.

- o Are you applying for coverage during your Medicare Supplement open enrollment period (6 month period beginning on the first day of the month when the prospect is 65 years old or older AND enrolls in Medicare Part B)? If under the age of 65, open enrollment begins on the first day of the month when your Medicare Part B is effective. (Agent note: Applicable ONLY if plans are available to those under the age of 65 in the prospect's state of residence.)
- o You are in a Medicare Advantage Plan and the plan is leaving Medicare or stops giving care in your area, or you move out of the plan's services area.
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- o You leave a Medicare Advantage plan, or drop a Medicare Supplement policy, because the company hasn't followed the rules or it misled you.

<u>Underwriting Review (omit if they qualify for guaranteed acceptance):</u>

Let the caller know that their eligibility for a Humana Medicare Supplement plan is dependant upon them meeting Humana underwriting requirements.

CLOSING

Close (Appointment/Seminar):

- Offer appointment/seminar: For example, what I'd like to do for you at this time is schedule one of our licensed agents to come to your home to show you the plan in black and white and provide answers to all of your questions so that you can make an informed decision. Most people find this to be very helpful. I'm sure you'll agree.
- o (If Yes) If appointment/seminar is accepted continue:
 - I have openings on <<u>date></u> at <<u>time></u> or <<u>date></u> at <<u>time></u>. Which is more convenient for you? (To schedule a seminar you will review the upcoming seminars in their area until they select the one they wish to attend. Then give them the date, time, location and address of the seminar.)
 - Verify first and last name.
 - Determine if anyone else in the home is on Medicare or will be in the next 3 months and will also attend the appointment/seminar.
 - Verify street address, city, county, state, zip and apartment number, if applicable.
 - Verify date and time of appointment/seminar (verify location of the seminar).
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- Give prospect Humana DMS telephone number <1-866-205-0000>, Humana DMS TTY/TDD number <711> and hours of operation <State the current hours> prior to end of every call.
- Express gratitude
- Ask for Referral
- End call
- (If no) If appointment/seminar is not accepted:
 - Ask the prospect if they have any questions you can answer that would help them make their decision.
 - Answer questions, refer back to the NEADS analysis conducted earlier in the call, discuss points of interest, determine if they have any objections and, if so, address the objections.
- Offer the appointment/seminar again: For example, what I'd like to do for you at this time is schedule one of our licensed agents to come to your home to discuss with you the plan and provide answers to all of your questions so that you can make an informed decision. Most people find this to be very helpful. I'm sure you'll agree.
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 - Perfect Telesales Experience (PTE) Question: On a scale of 1 to 5, with 5 being perfect, how well did I meet your needs and expectations during the call?

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